

HOUSINGAUTHORITYOFTHECITYOFBALMORHEA

SmallPHAPlanUpdate

AnnualPlanforFiscalYear: 2003

BOARDOFCOMMISSIONERS

EllenWeinacht,Chairman

AnthonyFleenor,ViceChairman

LoriBaeza,Commissioner

PeggyHonaker,Commissioner

RenoLewis,ResidentCommissioner

Submittedby:8/21/2003

TeresaRBorland,ExecutiveDirector

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBECOMPLETEDINAC
INSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

CORDANCEWITH

ManualAgencyPlan

1

SmallPHAPlanUpdate

Fiscal Year 2003

[24CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the filename in parentheses in the space to the right of the title.

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PHA Plan Agency Identification

PHAName: HOUSING AUTHORITY OF THE CITY OF BALMORHEA

PHANumber: TX316

PHA Fiscal Year Beginning: (mm/yyyy) 10/2003

PHA Plan Contact Information:

Name: Teresa R Borland, Executive Director

Phone: 915375- 2459

TDD: 915375- 2459

Email (if available): balmorha@pecos.net

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ Main administrative office of the local, county or State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

PHA Programs Administered :

- ☐ Public Housing and Section 8 ☐ Section 8 Only ☒ Public Housing Only

(2) **iii.ExecutiveSummary**

~~[24CFRPart903.79(r)]—~~

~~AtPHAoption,provideabriefoverviewoftheinformationintheAnnualPlan~~

~~[24CFRPart903.79(r)]~~

~~AtPHAoption,provideabriefoverviewoftheinformationi~~ ~~ntheAnnualPlan~~ N/A

TheBalmorheaHousingAuthorityisusingtheCapitalFundfrom2000,2001,and2002forupgradingthestandardsof thepublichousingdevelopment(22units).ItisthegoalofthisHousingAuthoritytocontinuethe renovations,whic h
aredesperatelyneededwithinititsdevelopment.

1.SummaryofPolicyorProgramChangesfortheUpcomingYear

Inthissection,brieflydescribechangesinpoliciesorprogramsdiscussedinlastyear'sPHAPlanthatarenotcovered inothersectio ns of this Update.Admissions&OccupancyPolicieswillbeupdated,andflatrents willbeeffective October1,2002.

2.CapitalImprovementNeeds

[24CFRPart903.79(g)]

Exemptions:Section8onlyPHAsarenotrequiredtocompletethiscompon ent.

A. ☒ Yes ☐ No:Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

(2) What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming ye ar? 2

\$39,363 (Estimated)

(3) ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, completetherestofComponent7.Ifno,skiptonextcomponent.

AnnualStatement/PerformanceandEvaluationReport

CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)PartI: Summary

PHAName:HousingAuthorityoftheCityofBalmor hea		GrantTypeandNumber CapitalFundProgram:TX21P31650100 CapitalFundProgram ReplacementHousingFactorGrantNo:		FederalFYofGrant: 2000	
<input type="checkbox"/> OriginalAnnualStatement		<input type="checkbox"/> ReserveforDisasters/Emergencies		<input type="checkbox"/> RevisedAnnualStatement(revisionno:)	
<input checked="" type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding: 3/31/03 <input type="checkbox"/> FinalPerformanceandEvaluationReport					
LineNo.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
		Original	Revised	Obligated	Expended
1	Totalnon -CFPFunds				
2	1406Operations	4,100		4,100	4,100
3	1408ManagementIm provements	3,000		3,000	4,200
4	1410Administration	4,000		4,000	1,642.50
5	1411Audit	1,500		1,500	-0-
6	1415liquidatedDamages				
7	1430FeesandCosts	5,000		5,000	-0-
8	1440SiteAcquisition				
9	1450SiteImprovement				
10	1460DwellingS tructures	20,500		20,500	-0-
11	1465.1DwellingEquipment —Nonexpendable	3,000		3,000	-0-
12	1470NondwellingStructures	512		512	-0-
13	1475NondwellingEquipment				
14	1485Demolition				
15	1490ReplacementReserve				
16	1492MovingtoWorkDemon stration				
17	1495.1RelocationCosts				
18	1498ModUsedforDevelopment				
19	1502Contingency				
+20	AmountofAnnualGrant:(sumoflines2 -19)	41,612		41,612	9,962.50
21	Amountofline20RelatedtoLBPActivities	-0-			
22	Amountofli ne20RelatedtoSection504Compliance	-0-			
23	Amountofline20RelatedtoSecurity	-0-			
24	Amountofline20RelatedtoEnergyConservationMeasures	-0-			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: Housing Authority of the City of Balmorhea		Grant Type and Number Capital Fund Program TX21P31650100 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TX316	OPERATIONS	1406		4,100		4,100	4,100	
	Management Improvements: PHA Staff Training Computer Maintenance/Update Software	1408		3,000		3,000	4,220	
	Administration: Advertising, Clerk	1410		4,000		4,000	1,642.50	
	Audit	1411		1,500		1,500	-0-	
	Fees and Costs Architect/Engineer PHA Inspector Abatement Consultant	1430		5,000		5,000	-0-	
	Dwelling Structures: Total Unit Rehab	1460		20,500		20,500	-0-	
	Dwelling Equipment: Purchase Range/Refrigerators	1465.1		3,000		3,000	-0-	
	Non-dwelling Structures: Maintenance Storage Unit	1470		512		512	-0-	
	TOTAL			41,612		41,612	9,962.50	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority of the City of Balmorhea			Grant Type and Number Capital Fund Program #: TX21P31650100 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2000
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TX316	09/30/2002			09/30/2003			

AnnualStatement/PerformanceandEvaluationReport**CapitalFundProgramandCapitalFundProgram ReplacementHousingFactor(CFP/CFPRHF)PartI:
Summary**

PHAName: HousingAuthorityoftheCityofBalmorhea		GrantTypeandNumber CapitalFundProgram:TX21P31650101 ReplacementHousingFactorGrantNo:		FederalFYofG rant: 2001	
<input type="checkbox"/> OriginalAnnualStatement		<input type="checkbox"/> ReserveforDisasters/Emergencies		<input checked="" type="checkbox"/> RevisedAnnualStatement(revisionno: 1)	
<input checked="" type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding: 3/31/03		<input type="checkbox"/> FinalPerformanceandEvaluationReport			
LineNo.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
		Original	Revised	Obligated	Expended
1	Totalnon -CFPFunds				
2	1406Operations	4,200	4,200	4,200	4,200
3	1408ManagementImprovements	3,000	3,000	2,865.53	2,865.53
4	1410Administration	4,000	4,000	-0-	-0-
5	1411Audit	1,500	1,500	-0-	-0-
6	1415liquidatedDamages				
7	1430FeesandCo sts	10,000	14,500	-0-	-0-
8	1440SiteAcquisition				
9	1450SiteImprovement	0	0		
10	1460DwellingStructures	17,753	13,753	-0-	-0-
11	1465.1DwellingEquipment —Nonexpendable				
12	1470NondwellingStructures				
13	1475NondwellingEquipment	2,000	2,000	1,199.81	1,199.81
14	1485Demolition				
15	1490ReplacementReserve				
16	1492MovingtoWorkDemonstration				
17	1495.1RelocationCosts				
18	1498ModUsedforDevelopment				
19	1502Contingency				
20	AmountofAnnualGrant:(sumof lines2 -19)	42,453	42,453	8,265.34	8,265.34
21	Amountofline20RelatedtoLBPAactivities	4,500	4,500	-0-	-0-
22	Amountofline20RelatedtoSection504Compliance				
23	Amountofline20RelatedtoSecurity				
24	Amountofline20RelatedtoEnergyConservationMeasures				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: Housing Authority of the City of Balmorhea		Grant Type and Number Capital Fund Program TX21P31650101 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TX316	OPERATIONS	1406		4,000	4,000	4,200	4,200	
	Management Improvements: PHA Staff Training Computer Maintenance/Update/Software	1408		3,000	3,000	2,865.53	2,865.53	
	Administration: Advertising, Construction drawings, specifications, clerk	1410		4,000	4,000	-0-	-0-	
	Audit	1411		1,500	1,500	-0-	-0-	
	Fees and Costs Architect/Engineer PHA Inspector Abatement Consultant, Lead Based Paint Inspector	1430		10,000	14,500	-0-	-0-	
	Dwelling Structures: Total Unit Rehab	1460		17,753	13,753	-0-	-0-	
	Nondwelling Equipment: Office equipment/supplies. Maintenance equipment/supplies.	1475		2,000	2,000	1,199.81	1,199.81	
	TOTAL			42,453	42,453	8,265.34	8,265.34	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III : Implementation Schedule							
PHA Name: Housing Authority of the City of Balmorhea			Grant Type and Number Capital Fund Program #: TX21P31650101 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2001	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual	
TX316	09/30/2003			09/30/2004			

AnnualStatement/PerformanceandEvaluationReport

CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Part1: Summary

PHAName: Housing Authority of the City of Balmorhea	Grant Type and Number Capital Fund Program: TX21P31650102 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2002			
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/03 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost	Total Actual Cost		
		Original	Revised	Obligated	Expended
1	Total non -CFP Funds				
2	1406 Operations	3,000		-0-	
3	1408 Management Improvements	5,000		-0-	
4	1410 Administration	2,000		-0-	
5	1411 Audit	1,500		-0-	
6	1415 Liquidated Damages				
7	1430 Fees and Costs	5,000		-0-	
8	1440 Site Acquisition				
9	1450 Site Improvement	3,000		-0-	
10	1460 Dwelling Structures	12,863		-0-	
11	1465.1 Dwelling Equipment — Nonexpendable	2,000		-0-	
12	1470 Non dwelling Structures	3,000		-0-	
13	1475 Non dwelling Equipment	2,000		-0-	
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2 -19)	39,363		39,363	
21	Amount of line 20 Related to LBP Activities	-0-			
22	Amount of line 20 Related to Section 504 Compliance	-0-			
23	Amount of line 20 Related to Security	-0-			
24	Amount of line 20 Related to Energy Conservation Measures	-0-			

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHAName: Housing Authority of the City of Balmorhea		Grant Type and Number Capital Fund Program TX21P31650102 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TX316	OPERATIONS	1406		3,000				
	Management Improvements: PHA Staff Training Computer Maintenance/Update/Software	1408		5,000				
	Administration: Advertising, Construction drawings, specifications, clerk	1410		2,000				
	Audit	1411		1,500				
	Fees and Costs Architect/Engineer PHA Inspector Abatement Consultant	1430		5,000				
	Site Improvement: Replace/Repair Fencing	1450		3,000				
	Dwelling Structures: Total Unit Rehab	1460		12,863				
	Dwelling Equipment: Purchase Range/Refrigerators	1465.1		2,000				
	Non dwelling Structures: Maintenance Storage Unit	1470		3,000				
	Non dwelling Equipment: Office equipment/supplies. Maintenance equipment/supplies.	1475		2,000				
	TOTAL			39,363				

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)****Part III: Implementation Schedule**

PHAName: Housing Authority of the City of Baltimore			Grant Type and Number Capital Fund Program #: TX21P31650102 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2002	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TX316	09/30/2004			09/30/2005			

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHAName: Housing Authority of the City of Balmorhea	Grant Type and Number Capital Fund Program: TX 21P31650103 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: 2003	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)			
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost	Total Actual Cost
		Original	Revised
		Obligated	Expended
1	Total Non -CFP Funds		
2	1406 Operations	3,000	
3	1408 Management Improvements	7,000	
4	1410 Administration	2,000	
5	1411 Audit	1,500	
6	1415 Liquidated Damages		
7	1430 Fees and Costs	5,000	
8	1440 Site Acquisition		
9	1450 Site Improvement	3,000	
10	1460 Dwelling Structures	6,744	
11	1465.1 Dwelling Equipment —Nonexpendable	1,000	
12	1470 Non dwelling Structures	1,000	
13	1475 Non dwelling Equipment	1,000	
14	1485 Demolition		
15	1490 Replacement Reserve		
16	1492 Moving to Work Demonstration		
17	1495.1 Relocation Costs		
18	1498 Mod Used for Development		
19	1502 Contin gency		
20	Amount of Annual Grant: (sum of lines 2 -19)	31,244	
21	Amount of line 20 Related to LBP Activities	-0-	
22	Amount of line 20 Related to Section 504 Compliance	-0-	
23	Amount of line 20 Related to Security	-0-	
24	Amount of line 20 Related to Energy Conservation Measures	-0-	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHAName: Housing Authority of the City of Balmorhea		Grant Type and Number Capital Fund Program TX21P31650103 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TX316	OPERATIONS	1406		3,000				
	Management Improvements: PHA Staff Training Computer Maintenance /Software	1408		7,000				
	Administration: Advertising, Construction drawings, specifications, clerk	1410		2,000				
	Audit	1411		1,500				
	Fees and Costs Architect/Engineer PHA Inspector Abatement Consultant	1430		5,000				
	Site Improvement: Trees	1450		3,000				
	Dwelling Structures: Total Unit Rehab	1460		6,744				
	Dwelling Equipment: Purchase Range/Refrigerators	1465.1		1,000				
	Nondwelling Structures: Maintenance Storage Unit	1470		1,000				
	Nondwelling Equipment: Office equipment/supplies. Maintenance equipment/supplies.	1475		1,000				
	TOTAL			31,244				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Housing Authority of the City of Balmorhea			Grant Type and Number Capital Fund Program #: TX21P31650103 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2003
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TX316	09/30/2005			09/30/2006			

D.CapitalFundProgramGrantSubmissions

(1)CapitalFundProgram5 -YearActionPlan

TheCapitalFundProgram5 -YearActionPlanisprovidedasAttachment -TX316"E"

CapitalFundProgramFive -YearActionPl an
PartI:Summary

PHANameHousing AuthorityoftheCityof Balmorhea				<input type="checkbox"/> Original5 -YearPlan <input checked="" type="checkbox"/> RevisionNo: 2	
Development Number/Nam e/HA-Wide	Year1	WorkStatementfor Year2 FFYGrant: 2004 PHAFY:10/2004	WorkStatementfor Year3 FFYGrant: 2005 PHAFY:10/ 2005	WorkStatementfor Year4 FFYGrant: 2006 PHAFY:10/ 2006	WorkStatementfor Year5 FFYGrant: 2007 PHAFY:10/ 2007
TX316	<i>Annual Statement</i>	1406\$4,200	1406\$4,200	1406\$4,200	1406\$4,200
		14083,000	14083,000	14083,000	14083,000
		14104,000	1410 4,000	14104,000	14104,000
		14111,500	14111,500	14111,500	14111,500
		143010,000	143010,000	1430 10,000	143010,000
		146017,753	146017,753	146017,753	146017,753
		14752,000	14752,000	14752,000	14752,000
CFPFunds Listedfor5 - yearplanning		\$42,453	\$42,453	\$42,453	\$42,453
Replacement Housing FactorFunds					

PartII:SupportingPages —WorkActivities Attachment -TX316"F"

Activitiesfor Year1	ActivitiesforYear:___ <u>2</u> ___ FFYGrant:TX21P31650104 PHAFY:10/ 2004			ActivitiesforYear:___ <u>3</u> ___ FFYGrant:TX21P31650105 PHAFY:10/2005		
	Development Number	MajorWorkCategories	Estimated Cost	Development Number	MajorWorkCategories	Estimated Cost
See	TX316	1406OPERATIONS	<i>\$4,200</i>	TX316	1460OPERATIONS	<i>\$4,200</i>
		1408ManagementImprovement PHASTaffTraining, ComputerSystemUpdatesand contractservice	<i>3,000</i>		1408ManagementImprovement ComputerSystemUpdatesand servicecontract,PHASTaff Training	<i>3,000</i>
		1410Administration Advertising,Clerkoftheworks	<i>4,000</i>		1410Administration Advertising,Clerkoftheworks	<i>4,000</i>
		1411Audit	<i>1,500</i>		1411Audit	<i>1,500</i>
		1430FeesandCosts Architect,Engineer,PHA Inspector	<i>10,000</i>		1430FeesandCosts Architect,Engineer,PHAInspector	<i>10,000</i>
ANNUAL						

	TX316	1460DwellingStructures ReplaceVCTFloors,Renovate bathrooms.Replaceinteriorand exteriordoors,miniblinds, windows/screens,exteriorscreen doors,woodtrim.Renovate kitchen.Installceilingfans.Abate asbestos.Paintexteriorandinterio units.Modifykitchenfordryer, installdryerventandplug.	17,753	TX316	1460DwellingStructures ReplaceVCTFloors,Renovate bathrooms.Replaceinteriorand exteriordoors,miniblinds, windows/screens,exteriorscreen doors,woodtrim.Reno vatekitchen. Installceilingfans.Abateasbestos. Paintexteriorandinteriorunits. Modifykitchenfordryer,install dryerventandplug.	17,753
Statement		1475NondwellingEquipment Officeequipment,maintenance suppliesandmaterials	2,000		1475NondwellingEquipment Officeequipment,maintenance suppliesandmaterials	2,000
TotalCFPEstimatedCost			\$42,453			\$42,453

PartII:SupportingPages —WorkActivities

Activitiesfor Year1	ActivitiesforYear: __ 4__ FFYGrant:TX21P31650106 PHAFY:10/2006			ActivitiesforYear: _5_ FFYGrant:TX21P31650107 PHAFY:10/2007		
	Development Number	MajorWorkCategories	Estimated Cost	Development Number	MajorWorkCatego ries	Estimated Cost
See	TX316	1406OPERATIONS	<i>\$4,200</i>	TX316	1406OPERATIONS	<i>\$4,200</i>
		1408ManagementImprovement PHASTaffTraining, ComputerSystemUpdatesand contractservice	<i>3,000</i>		1408ManagementImprovement PHASTaffTraining, Computer SystemUpdatesand contractservice	<i>3,000</i>
		1410Administration Advertising,Clerkoftheworks	<i>4,000</i>		1410Administration Advertising,Clerkoftheworks	<i>4,000</i>
		1411Audit	<i>1,500</i>		1411Audit	<i>1,500</i>
		1430FeesandCosts Architect,Engineer,PHA Inspector	<i>10,000</i>		1430FeesandCosts Architect,Engineer,PHAInspector	<i>10,000</i>

Annual	TX316	1460 Dwelling Structures Replace VCT Floors, Renovate bathrooms. Replace interior and exterior doors, mini blinds, windows/screens, exterior screen doors, wood trim. Renovate kitchen. Install ceiling fans. Abate asbestos. Paint exterior and interior units. Modify kitchen for dryer, install dryer vent and plug.	17,753	TX316	1460 Dwelling Structures Replace VCT Floors, Renovate bathrooms. Replace interior and exterior doors, mini blinds, windows/screens, exterior screen doors, wood trim. Renovate kitchen. Install ceiling fans. Abate asbestos. Paint exterior and interior units. Modify kitchen for dryer, install dryer vent and plug.	17,753
		1475 Non Dwelling Equipment Office equipment, maintenance supplies and materials	2,000		1475 Non Dwelling Equipment Office equipment, maintenance supplies and materials	2,000
Statement						
Total CFPEstimatedCost			\$42,453			\$42,453

3.Demolition and Disposition

[24CFR Part 903.79(h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name:
1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24CFR Part 903.79(k)]

- A. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum homeowner down payment requirement of at least 3 percent and requiring that at least 1 percent of the down payment comes from the family's resources
- ☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- ☐ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24CFR Part 903.7(m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- A. ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ _____

- C. ☐ Yes ☐ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D. ☐ Yes ☐ No: The PHDEP Plan is attached as Attachment _____

6. Other Information

[24CFR Part 903.79(r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. ☐ Yes ☒ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2.If yes,the comments are Attached at Attachment (Filename)

3.In what manner did the PHA address those comments?(select all that apply)

- ☐ The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
☐ Yes ☐ No: below or
☐ Yes ☐ No: at the end of the RAB Comments in Attachment ____.
- ☐ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment ____.
- ☐ Other: (list below)

B.Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary). INCLUDED IN 5 YEAR AGENCY PLAN

1.Consolidated Plan jurisdiction: (REEVE COUNTY)

2.The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☐ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
- ☐ Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

☐ Yes ☒ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

4.The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

C.Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A.Substantial Deviation from the 5-year Plan: Each capital item shall be entered into an approved budget line item. Upon implementation, should the item fall over budgeted amounts,

fungibility will be exercised upon approval from HUD. Emergency work items affecting health and safety of tenants or staff will take precedence over non-emergency work items and long-term functional items will take precedence over aesthetic amenities.

B. Significant Amendment or Modification to the Annual Plan: Should the need arise to amend or add policies, the Balmorhea Housing Authority shall notify tenants, publish its intention as required by local, state and federal law, open it for public comment, and present it to the Board of Commissioners for review and approval. Should the need arise to amend capital items, Balmorhea Housing Authority will contact HUD to request fungibility among line items.

Attachment TX316“G”
Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certification of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers in Public Housing <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
N/A	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
N/A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
N/A	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other residents services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
N/A	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
X	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075 - PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History

A. Amount of PHDEP Grant \$ _____

B. Eligibility type (Indicate with an "x") N1 _____ N2 _____ R _____

C. FFY in which funding is requested _____

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. This summary must not be more than five (5) sentences long.

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

12 Months _____ 18 Months _____ 24 Months _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balance should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Dates should include any HUD -approved extensions or waivers. For grant extensions received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant#	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY1995						
FY1996						
FY1997						
FY1998						
FY1999						

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY ____ PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TAMatch	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 – Drug Prevention	
9170 – Drug Intervention	
9180 – Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise — not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 – Reimbursement of Law Enforcement					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9116 -GunBuybackTAMatch					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9120 -SecurityPersonnel					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9130 –EmploymentofInvestigators					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#o f Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

9160 - Drug Prevention					Total PHDEP Funding : \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

9170 -DrugIntervention					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9180 -DrugTrea tment					TotalPHDEPFunding:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

9190 -OtherProgramCosts					TotalPHDEPFunds:\$		
Goal(s)							
Objectives							
ProposedActivities	#of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)	PerformanceIndicators
1.							
2.							
3.							

Required Attachment "H" Resident Member on the PHA Governing Board

1. ☒ Yes ☐ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:

Reno Lewis

B. How was the resident board member selected: (select one)?

☐ Elected

☒ Appointed

C. The term of appointment is (include the date term expires): 12/11/2002

Term expires 9/30/2004

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a fulltime basis

☐ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

☐ Other (explain):

B. Date of next term expiration of a governing board member: 09/30/2004

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Mr. Ruben Fuentez - Mayor

Required Attachment TX316 “T” Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Marisa Rodriguez

Sammy Iniguez

Noraima Mendez